

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

01518410 17 DEC 2004

FILING DATE

APPLICANT(S)

9-10-07 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/		/					51			
2			/		/					52			
3			/		/					53			
4			/		/					54			
5										55			
6										56			
7			/		/					57			
8			/		/					58			
9										59			
10			0		3					60			
11										61			
12										62			
13										63			
14										64			
15			/		/					65			
16			/		/					66			
17			/		/					67			
18			/		/					68			
19										69			
20										70			
21										71			
22										72			
23										73			
24										74			
25										75			
26										76			
27										77			
28										78			
29										79			
30										80			
31										81			
32										82			
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36										86			
37										87			
38										88			
39										89			
40										90			
41										91			
42										92			
43										93			
44										94			
45										95			
46										96			
47										97			
48										98			
49										99			
50										100			
TOTAL IND.			↓	6	↓	5	↓			TOTAL IND.			↓
TOTAL DEP.			←	8	←	15	←			TOTAL DEP.			←
TOTAL CLAIMS			14		18					TOTAL CLAIMS			14